

Utah State Hospital Newsletter

Issue 40

Fall 2012



“Role of State Hospitals”

2013 Position Statement to be developed



The 2012 Western Psychiatric State Hospital Association (WPSHA) held our annual meeting in Las Vegas, New Mexico recently to address current issues facing State Hospitals around the country and especially in our Western Region. Health Care Reform was a major topic of discussion as well as treatment issues and other challenges facing the individuals we serve. Bob Glover, Director of the National Association of Mental Health Program Directors (NASMHPD) spoke to the group about National Trends and Healthcare Reform Initiatives and how they are impacting us. NASMHPD oversees mental health programming around the country as part of the Health and Human Services. Glover works closely with the State Mental Health Commissioners and State Hospital Superintendents. He reported that WPSHA is the strongest regional organization within NASMHPD and is very proud of the work our organization is accomplishing. We had an opportunity to tour the facility in New Mexico. I was very impressed with their professional and friendly staff and their commitment to excellence. They reminded me of our great USH staff.

One exciting opportunity is that WPSHA was invited to host at our next annual meeting leaders from all four regions to assist NASMHPD in developing a position paper on the future of State Hospitals. This project will help define our Role as State Hospitals within the continuum of mental health services. NASMHPD has influenced many service delivery and best practice initiatives for years including efforts to reduce Seclusion and Restraints within mental health cultures as well as the Tobacco Free organizations. With all the changes in health care, this project is vital for us and gives us the opportunity to participate in shaping the future of State Hospitals. National Leaders in Washington turn often to NASMHPD for input into health policy reform initiatives. Many issues were addressed including activities of the Department of Justice monitoring Olmstead issues around the nation. Our REDI program was developed by the Division of Mental Health in Utah to address discharge barriers and challenges and to insure good discharge planning is in place.

Other presentations at the conference focused on a variety of significant issues. WPSHA is well-known for our Benchmarking projects which help us see how we measure up to our peers in the field. We compare data that is helping to measure our performance against the top performers. Areas addressed include things such as Adverse Drug Reactions, Seclusion and Restraint, Readmissions, Staff and Patient Injuries, staff to patient ratios, etc. Staff from the Western Interstate Commission for Higher Education (WICHE) organization presented opportunities for hospitals to receive technical assistance in many areas of data support, technology and workforce development.

We also discussed the growth of the Forensic population around the country and the increase percentage of Forensic vs. Civil beds in many facilities. This will also be an area of importance in upcoming meetings. Many hospitals are providing Acute Care, Outpatient and Nursing Home services which present many different challenges for State Hospitals.

Overall, the WPSHA organization is a great group of committed professionals and leaders in the Western Region includes hospitals from North and South Dakota all the way to Alaska and Hawaii. Our relationships with these peers are invaluable to us. We are a wonderful support to each other. I always leave WPSHA feeling very proud of the Utah State Hospital. We continue to demonstrate great outcomes and a commitment to be the best we can.

~Dallas Earnshaw, Superintendent



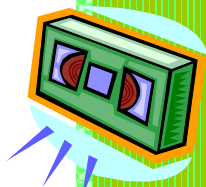
USH PATIENT LIBRARY: CHECK IT OUT!

Did you know that the Utah State Hospital has a patient library available? It is a fabulous place where patients can visit, hang out and see what's available. We have lots of materials to choose from!

Of course, as in any library, books are plentiful! We have a children's section where caterpillars are munching away and Dr. Seuss reigns supreme! We have a young adult section where Belle and Edward and many more of their vampire contemporaries hang out. Old favorites and new possibilities can be found in the adult fiction section. Options from Stephen King and Dean Koontz to Jodi Kilpack and James Patterson line the shelves. The options are almost endless! The nonfiction section tickles the fancy with exciting books to learn about an endless array to topics from true crime to civil war history and Shakespeare.



We also offer videos to check out for the units. Everything from romantic comedies to drama and action films line the racks and delight the imagination. We have many family videos; new favorites like Gnomeo and Juliet as well as old friends like Alice in Wonderland and Cinderella.



Music is a large part of the library. We have drawers full of CDs for your listening pleasure. These are only available for use while at the library, but we welcome any patients who would like to "relax" to Eminem or Metallica! Country and classical artists are also available as well as everything in-between!



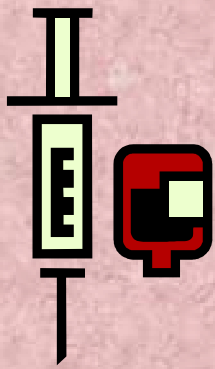
For those patients who love to read magazines, we subscribe to over 50 different titles. Everything from Highlights and Jack and Jill for the young patrons to Glamour and Seventeen for the ladies can be found. Cooking Light and Rachel Ray will tantalize your senses with recipes to try. Field and Stream competes with Car and Driver for male readers' attention. We also have three newspapers available daily. We subscribe to the Daily Herald, Salt Lake Tribune and the Deseret News. If your patients just want a place to relax and pick up a magazine or read a newspaper, this is the place!



To enable our patients to stay in touch with the world and friends, we have three computers with internet capability available for them to use.

Have you brought patients to the Patient Library yet? If not, you should definitely come up and "check it out"! We are open Tuesdays and Thursdays from 1 p.m. to 5 p.m. and Saturday mornings from 9:30-11:30. Please check with Marilyn at (801) 344-4264 before bringing up a group of patients to make sure the library won't be overcrowded!

~Marilyn Bonnett, Librarian



The Flu Vaccine

Every year 90,000 patients die from hospital acquired infections. Part of those infections that patients acquire come from Health Care Workers (HCW) that have NOT been vaccinated against the flu. The Joint Commission and CDC as well as other organizations recommend all HCW be vaccinated because it improves patient safety. At USH, we have reviewed the recommendations and will join all other hospitals in Utah by mandating all employees receive the flu shot.

The CDC states, "Influenza (the flu) is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness, and at times can lead to death. Some people, such as older people, young children, and people with certain health conditions, are at high risk for serious flu complications. The best way to prevent the flu is by getting **vaccinated** each year."

The season designated as "Flu Season" can begin as early as October 1st and last as late as the end of May according to CDC guidelines. The CDC states, "The Flu virus is easily spread. People with flu can spread it to others up to about 6 feet away. Most experts think that flu viruses are spread mainly by droplets made when people with flu cough, sneeze or talk. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Less often, a person might also get flu by touching a surface or object that has flu virus on it and then touching their own mouth or nose."

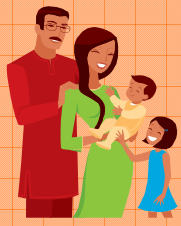
Added information from the CDC states, "Most healthy adults may be able to infect others beginning 1 day **before** symptoms develop and up to 5 to 7 days **after** becoming sick. Children may pass the virus for longer than 7 days. Symptoms start 1 to 4 days after the virus enters the body. **That means that you may be able to pass on the flu to someone else before you know you are sick, as well as while you are sick.** Some persons can be infected with the flu virus but have no symptoms. During this time, those persons may still spread the virus to others."

The CDC advises that the only contraindication for not receiving the vaccine is a history of the disease Guillian Barre. Pregnancy and allergies to eggs are no longer a consideration; however, anyone who is pregnant or has an egg allergy should consult their doctor before having the vaccination. The "flu shot" is an inactivated vaccine (containing killed virus) that is given with a needle, usually in the arm. The flu shot is approved for use in people older than six months, including healthy people and people with chronic medical conditions.

This fall, **ALL** USH employees will be required to receive a flu vaccination. Those who refuse the vaccine will need to sign a contract that they will wear a mask while in patient care areas from November 1, 2012 thru March 31, 2013.

The USH flu clinic is held in October and the flu vaccine is available to all employees, however, if you would like to receive the shot before the clinic, you can contact Heidi Smith in Infection Control. Each year, enough flu vaccines are ordered to vaccinate all patients and employees. All employees must fill out a form to either accept or decline the vaccination and have 30 days from the date USH receives the vaccine to complete the required paperwork and subsequent vaccine. Employees who receive the vaccine will be given a sticker to place on their name badge to indicate that they have received the flu shot.

~Heidi Smith, RN Infection Control



Forensic Family Day

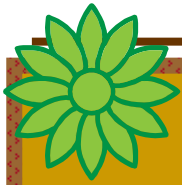
A critical aspect of recovery is said to be “others” who believe in the person's potential to recover, and who stand by them during difficult times. While we as mental health professionals can offer a valuable alternative to these relationships, help foster hope, and encourage progress, relationships with friends, family, and the community often have a wider and longer-reaching importance. Families come in many shapes and sizes and with a whole van full of various forms of emotional and relational baggage. We have all witnessed, in one form or another, the strain that mental illness can place on the family. Family Day is a rare opportunity for families to come together and begin or continue the difficult healing process. It is also a valuable opportunity for staff to connect with these family members, coordinate treatment, and explain services and options available here at the Hospital.

This past Saturday, the 15th of September, the USH Forensic Building was excited to host our first family day in several years. Like many things here at USH, this was a multi-disciplinary affair with booths and displays provided by many, if not all, of the various professions and disciplines. They were setup in a faire style format with chairs available for family to gather and chat with social workers or simply amongst themselves. Due to security concerns, specific to the forensic environment, and a low level of general family involvement with current patients, our numbers were a bit lower than expected, but still quite respectable. 31 family members signed in to visit approximately 18 of our patients and stayed for about two hours. A strong measure of staff success was that many of the families stayed the entire two hours with few leaving early. Each booth did a fantastic job in providing information regarding services provided here at the hospital, as well as, general information specific to that particular discipline. Many family members were heard saying, “Wow, I didn’t know that the hospital provided so many services for patients.” Light snacks and fruit were provided by food services, which did a phenomenal job not only making the whole affair look great, but were responsible for many leaving with a good taste in their mouth. There are simply too many to thank and so many that pitched in to make this a great success.

~Michael Cox, LCSA, AD F4

Every great dream begins with a dreamer. Always remember, you have within you the strength, the patience, and the passion to reach for the stars to change the world.

~Harriet Tubman



Adult Services Family Day

Saturday, August 25, 2012 USH Adult Services hosted their annual "Family Day". The Treatment Mall in Rampton I was set up to as an information fair with representatives from Administration, Social Work, Recreation Therapy, Food Services, Sunrise, Vocation Rehabilitation, Religious Services and Patient Advocate Services. There were 32 visitors for 20 patients that attended. Many patients joined their family members to walk through the colorful and informative displays that were set up and to enjoy some great refreshments provided by our USH food services. A total of 12 staff members from the different service areas represented, spent time answering questions and explaining USH services and programming. Family members came from near and far. Some came from as far away as Cedar City and Logan. As they left they expressed things such as "It was well worth the drive to come here today." Many family members took the opportunity to enjoy spending additional time with their loved ones in Unit visiting rooms or on grounds with a picnic. Thanks to all the many hands that helped this event to be successful.

~Diane Maciel, LCSW, AD SE



2nd Annual Hospital Hustle



On September 13, 2012, USH patients and staff participated in the 2nd annual *Hospital Hustle* organized by the Children's Unit. The kids have been working hard all year to get in shape and have taken part in several community 5K races. Because being fit feels so good, they wanted to share the experience with the rest of the hospital. The event included a mile walk/run and a 5K run. Both courses wove around the scenic hospital campus on a beautiful September evening. Over 80 patients from all over the hospital enthusiastically participated. Patients from the Children's Unit got the crowd moving with a spunky pre-race song and dance. Over 130 race t-shirts were distributed and will definitely be noticed circulating around the campus. All runners enjoyed post-race snacks provided by our kitchen staff. Prizes were awarded to patients with the fastest times in both races. Outside volunteers graciously helped with timing, race support, registering, setting up and race shirts to make the occasion a success. The Children's Unit would like to thank all those who got involved and especially those who volunteered to run with patients. Hopefully, the event was motivating and invigorating for all who joined in the fun. Start preparing now to join us next September for the 3rd annual *Hospital Hustle*!

~Merrilee Manwaring





USH Campus to Undergo Dramatic Changes

Over the next several years, the hospital campus will change dramatically with the demolition of three of the oldest buildings. The Medical Services Building, the Youth Center, and the Beesley Building will be torn down and replaced with new, modern facilities.

When each of these three buildings was built, there was a specific need – yet funding was very difficult to get. So, why did staff work so hard to get the funding, what was the specific need of each building, and how did their construction contribute toward better mental health treatment?

The Medical Services Building has a unique history and will be covered in a future article. The Beesley and Youth Center Buildings are both a part of the history of the treatment of children and youth at the hospital and so will be covered together in this article.

The hospital has always treated children. In fact, one of the first patients admitted to the new Territorial Insane Asylum on July 20, 1885, was Almira, a young girl of 10 years of age. The youngest child treated at the asylum was Phyllis Joan and she was 18 months old. Although children have been part of the hospital population from its beginning, accommodations and treatment programs especially for them were late in coming.

Records show that almost every one of the 25 wards at the hospital in 1955 had children and youth living on them. They lived in the same wards as the adults – there was no separate living areas designated for the young population. Even though the hospital had finally initiated a youth program in 1964, the children and youth continued to live on adult wards. Aides would escort them to school and therapy.

With the development of new medications for mental illness in 1955, the hospital population began to decline and by the 1960's space for a separate youth dorm had become feasible. In 1968, space finally became available in the Dunn Building and the youth and children were moved to the second floor of the west wing. It would be a few more years before the children would get their own dorm in the Medical Services Building.

The minutes of the Board of Trustees noted on December 27, 1972, that “the children should move to the MS Building and the adolescent ward would expand to cover both wings of the second floor of the Dunn Building.” However, there were no funds to move the children and it wasn't until 1974 that records show a playground had been built on the south side of the MS Building to accommodate the children. Records list no date for the actual move, but we can assume that they moved sometime between late 1973 or early 1974.

In the fall of 1957, in cooperation with the Provo School District the first school was opened at Utah State Hospital. Prior to that date, there was no formal educational program for the children. The first teacher hired through Provo School District was for the 1956-57 school year. JoAnn Gay Richards started in January 1957 with 12 children in her class. She resigned at the end of the school year and Ren Smith was hired. He was the only teacher until 1964 and taught both elementary and secondary school classes.

(Continued next page...)



Beesley Building

(...Continued from page 6)

In 1964, a Youth Center Program was organized that was designed as both a school and a treatment program. The plan called for the hiring of a number of professional teachers to work alongside hospital treatment staff. Even though there had been a small school at the hospital since 1957, there was no formal school building. Classes were held in a makeshift classroom wherever space was available.



Student Nurses at the Youth Center - 1957



Youth Center

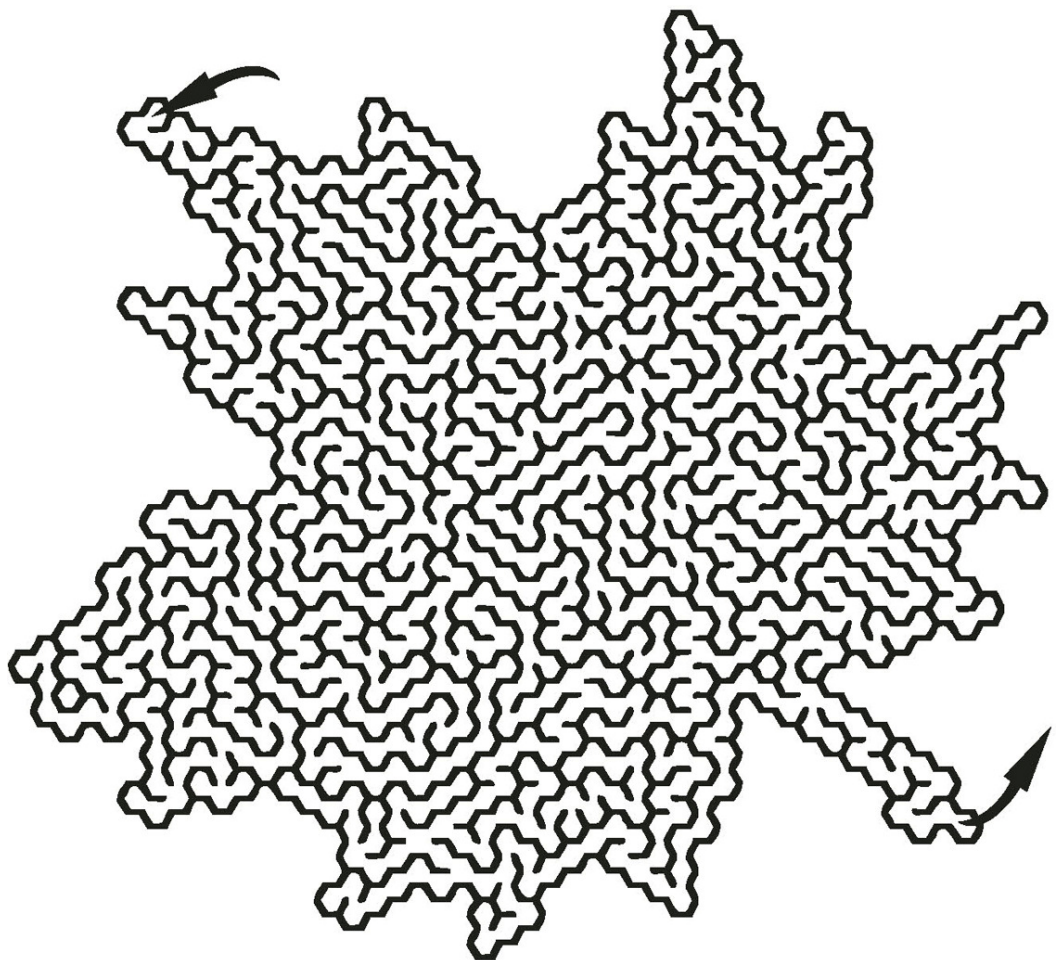
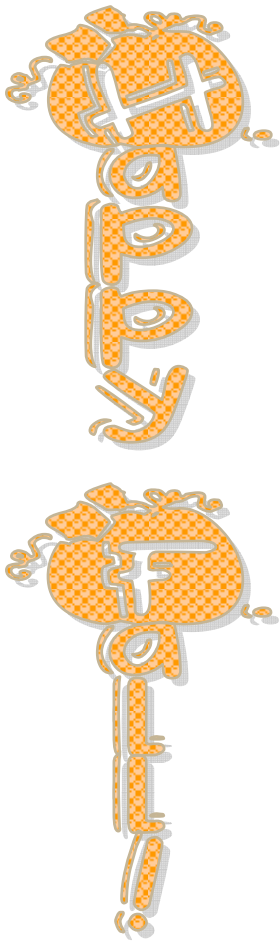
For those who visit the Youth Center and wonder at its unusual design, it was not always a school. It was originally built in 1951 as a home for the student nurses enrolled in the psychiatric course as part of the pre-nursing training. The home was designed to accommodate 32 nurses, along with apartments for four supervisors. There was also a snack kitchen, a laundry, a big living room with a fireplace and a sunny dining room. Young women came from all over Utah and would live at the home for 12 weeks. The home continued to be used for student nurses until the early 1960's when the nursing program was phased out. In 1964, the building was converted into the school building for the children and youth providing the first formal school setting for children at the hospital. Today, the youth school program resides in this area.

On October 16, 1985, the Beesley Building was opened at a ribbon-cutting ceremony by Governor Norman Bangerter. The Beesley Building was the first building built at Utah State Hospital specifically for the needs of the youth.

It was because of the generous donation of \$1,370,000 from the John Oxley and Effie June Beesley Charitable Foundation that the hospital was able to build the 56-bed youth dorm. John and Effie Beesley were prominent Provo citizens and philanthropists who were involved in many worthwhile projects in Utah County including funding to help make possible the Heart Clinic at Utah Valley Regional Medical Center.

The Beesley Building and the Youth Center provided treatment options for a youth population that had been ignored for many years. Governor J. Bracken Lee noted at the dedication of the Nurses Home in 1951, "the state and nation are continually growing and changing. Nothing can be maintained as an ideal standard," he said. "Things that are new today will be outdated a few years hence; so let us be grateful for what we now possess..." These two buildings have served the youth at the hospital well, but we look forward to new buildings that will provide the "ideal standard" for the treatment of today's youth.

~Janina Chilton, Historian



USH NEWSLETTER

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